

CLAIMS ONLY

Application Number

101718,900

Filing Date

Applicant(s)

* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	/					
2	/					
3	/					
4	/					
5	/					
6	/					
7	/					
8	/					
9	/					
10	N					
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49						
50						
Total Indep	2					
Total Depend	14					
Total Claims	16					

*	Indep	Depend	*	Indep	Depend	*
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Total Indep						
Total Depend						
Total Claims						